

COVER PAGE

2013 MAR 26 AM 9:32

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Lombard James Dean

**1. Office, Agency, or Court**

Agency Name  
State Controllers Office  
Division, Board, Department, District, if applicable  
Executive Office  
Your Position  
Chief Administrative Officer

► If filing for multiple positions, list below or on an attachment.

Agency: See attached Position:

**2. Jurisdiction of Office (Check at least one box)**

☒ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County ☐ County of  
☐ City of ☐ Other

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.  
-or-  
The period covered is / / , through December 31, 2012.  
☐ Leaving Office: Date Left / / (Check one)  
☐ The period covered is January 1, 2012, through the date of leaving office.  
☐ The period covered is / / , through the date of leaving office.  
☐ Assuming Office: Date assumed / /  
☐ Candidate: Election year and office sought, if different than Part 1:

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page:

☒ Schedule A-1 - Investments - schedule attached ☐ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule A-2 - Investments - schedule attached ☐ Schedule D - Income - Gifts - schedule attached  
☐ Schedule B - Real Property - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached  
-or-  
☐ None - No reportable interests on any schedule

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
Sacramento CA 95814  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS (OPTIONAL)  
( 916 ) 327-8299 JLombard@sco.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the

Date Signed 03/21/2013  
(month, day, year)

Signature

# SCHEDULE A-1 Investments

## Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

*Do not attach brokerage or financial statements.*

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

► NAME OF BUSINESS ENTITY  
CVB Financial Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
Chino Valley Bank

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

► NAME OF BUSINESS ENTITY  
\_\_\_\_\_

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
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 \_\_\_\_\_ / \_\_\_\_\_ / 12      \_\_\_\_\_ / \_\_\_\_\_ / 12  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**Multiple Positions:**

Agency: Department of Finance

Position: FI\$Cal Steering Committee Member

Agency: State Public Works Board

Position: Member representing Controller

Agency: State Lands Commission

Position: Member representing the Controller